## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

|  |                                 | MO AS FIL    | ED - PART   |  | ```` <b>.</b> ``.``.``.``.``.``.` | L ENTITY               | <u></u>       |              |                       | IER T                |
|--|---------------------------------|--------------|---|--|-----------------------------------|------------------------|---------------|--------------|-----------------------|----------------------|
|  |                                 |              | (Column 1)  | (Column 2)                                 | TYPE                              |                        | <b>-</b>      | OR           | SMA                   | LL EN                |
| U.S. NATION                                    | AL STAGE FE                     | ES           |   |  | RA                                | TE I                   | Eε            |              | RATE                  |                      |
| BASIC FEE                                      |                                 | SMAI         | LL ENT. = \$ 150  | LARGEENT. = \$ 300                         | BASIC F                           | EE .                   |               | OR BASIC FE  |                       |                      |
| EXAMINATION                                    | FEE                             |              | PCT Article 33(1)<br>6 \$ 50 / \$ 100                   | All other situations = 1 100 / 1 - 200     | EXAM, F                           | E€                     |               |              | EXAM. FEE             |                      |
| SEARCH FEE                                     |                                 | ALL OF       | SA = \$ 50 / \$ 100<br>Vier countries =<br>200 / \$ 400 | All other situations: =<br>\$ 250 / \$ 500 | SEARCH                            | FEE                    |               |              | SEARCH FE             | E (                  |
| EE FOR EXTRA SPEC. PGS.                        |                                 |              | minus 100 =   | 150 =                                      | X \$ 12                           | 5 =                    |               |              | × \$.250              |                      |
| OTAL CHARGEABLE CLAIMS                         |                                 | 1            | / minus 20 =  |  | X \$ 25                           | = ^                    |               | OR X \$ 50 : |                       |                      |
| NDEPENDENT CLAIMS                              |                                 | 1            | minus 3 = .   |  | X \$ 100                          | ) =  <br>              |               | OR X \$ 200  |                       |                      |
| JLTIPLE DEPE                                   | NDENT CLAIM                     | PRESENT      |   |  | +\$ 180                           | ) =                    |               | DR           | + \$ 360 =            |                      |
| If the difference                              | ce in column 1                  | is less than | zero, enter "0"   | in column 2                                | TOTAL                             |                        | $\exists$     | DR .         | TOTAL                 | 13                   |
| 12/11/06                                       | REMAINING<br>AFTER<br>AMENDMENT |              | HIGHES<br>NUMBE<br>PREVIOUS<br>PAID FOI                 | R PRESENT<br>SLY EXTRA                     | RATE                              | ADD<br>TIONA<br>FEE    |               |              | RATE                  | AD<br>TIOI<br>FE     |
|  | CLAIMS A<br>(Column 1)          |              | ED - PART   |  | SMAI                              | L ENTITY               | 0             | D            | OTHER                 |                      |
| Total  | AMENDMENT                       | Minus        |   |  | ×                                 | - <b>N</b>             |               |              |                       |                      |
| Independent                                    | . 1                             | Minus        | 1 2   |  | X \$ 25 =                         | $+ \setminus -$        | Of            | -            | \$ 50 =               | $\Lambda$            |
| FIRST PRES                                     | L /<br>ENTATION OF I            |              | PENDENT CIA   | M []                                       | X\$ 100 =                         | $+\lambda$             | OF            | -            | \$ 200 =              |                      |
|  |                                 |              |   |  | + \$ 180 =                        |                        | OR            |              | \$ 360 =<br>AL ADOIT. |                      |
|  |                                 |              |   |  | FEE                               | L                      | <b>1</b> 1 or |              | FEE [                 |                      |
|  | (Column 1)                      | 1            | (Column 2)  | (Column 3)                                 |                                   |                        |               |              |                       |                      |
|  | REMAINING<br>AFTER<br>AMENDMENT |              | HIGHEST HUMBER PREVIOUSLY PAID FOR                      | PRESENT<br>EXTRA                           | RATE                              | ADDI-<br>TIONAL<br>FEE |               | R            | ATE                   | ADDI<br>TIONA<br>FEE |
| otal   |                                 | Minus        |   |  | X \$ 25 =                         |                        | OR            | ×s           | 50 =                  |                      |
| dependent *                                    |                                 | Minus        | 844   |  | X \$ 100 =                        |                        | OR            | X \$         | 200 =                 |                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |              |   |  | +\$180=                           |                        | OR            | +\$          | 360 =                 |                      |
|  |                                 |              |   |  |                                   | TAL ADDIT. OR          |               | TOTAL ADDIT. |                       |                      |